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APPLICANTS

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** CONTINUING DATA *****

This application is a DIV of 09/378,104 08/20/1999 PAT 6,321,117

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 12/28/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature _____ Initials _____	STATE OR COUNTRY MN	SHEETS DRAWING 3	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 4
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ADDRESS

21186
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TITLE

CHANGE LOG FOR IMPLANTABLE MEDICAL DEVICE

FILING FEE

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